



State Of Delaware  
Motor Fuel Tax Administration  
International Registration Plan

IRP Account Number: \_\_\_\_\_ IRP Account Name: \_\_\_\_\_

Date: \_\_\_\_\_

As a Commercial Motor Vehicle registrant, I hereby certify knowledge of applicable Federal and State motor carrier safety regulations and federal hazardous materials regulations adopted by the State of Delaware. (Including those found in Title 21 Chapter 47, and Title 29 Chapter 82 §8225 of the Delaware Code.)

Registrant Printed Name \_\_\_\_\_

Title \_\_\_\_\_

Registrant Signature \_\_\_\_\_

Your registration will not be renewed until the above certification is signed and returned to the International Registration Plan Section.